

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09854 314

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	20	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	20 minus 20 =	*
INDEPENDENT CLAIMS	4 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	40.00
+135=	
TOTAL	395.00

RATE	FEE
BASIC FEE	710.00
X\$18=	
X80=	
+270=	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	=
	Independent	*	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	

ADDITIONAL FEE

ADDITIONAL FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	=
	Independent	*	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	

ADDITIONAL FEE

ADDITIONAL FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	=
	Independent	*	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	

ADDITIONAL FEE

ADDITIONAL FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	<u>201/101</u>				_____	_____	=	_____
Total Claims >20	<u>203/103</u>	_____	-20 =	_____	X	_____	=	_____
Independent Claims >3	<u>202/102</u>	_____	-3 =	_____	X	_____	=	_____
Mult. Dep Claim Present	<u>204/104</u>				_____	_____	=	_____
Surcharge	<u>205/105</u>				_____	_____	=	_____
English Translation	<u>139</u>							_____
<u>TOTAL FEE CALCULATION</u>								

Fees due upon filing the application:

Total Filing Fees Due = \$ 395

Less Filing Fees Submitted - \$ 355

BALANCE DUE = \$ 40

Office of Initial Patent Examination